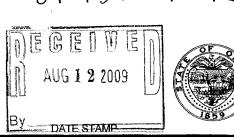


US Army Corps Of Engineers (Portland District)

AND

Joint Permit Application Form



Corps Action ID Number NWP-2007-195 Oregon Denarth Oregon Department of State Lands No

SEND ONE SIGNED COPY OF YOUR APPLICATION TO EACH AGENCY

US Army Corps of Engineers:

District Engineer

ATTN: CENWP-OD-GPPO

Box 2946

Portland, OR 97208-2946

503-808-4373

DSL - West of the Cascades:

State of Oregon

Department of State Lands

775 Summer Street, Suite 100 Salem, OR 97301-1279

503-986-5200

DSL - East of the Cascades:

State of Oregon

Department of State Lands

1645 NE Forbes Road, Suite 112

Bend, Oregon 97701 541-388-6112

AND

PO Box 4395, Unit 18

State of Oregon

Portland, OR 97208-4395

Department of State Lands

Send DSL Application Fees to:

(Attach a copy of the first page of the application)

Applicant Name and Address Vigor Industrial LLC Home Phone # Fax # Consultant Contractor Property Owner Business Phone # Business Phone # Fax # F			
Name and Address Check one Consultant Contractor Home Phone # Fax # Email			
Dropasty Ouper			
Name and Address Home Phone # If different from above 1 Email			
(2) PROJECT LOCATION			
Street, Road or Other Descriptive Location Legal Description (attach <u>tax lot map</u> *)			
Portland Shippard Township Range Section Quarter/Qua Swan Island	ırter		
Swan Island 5555 N. Channel Ave IN IE 17 SE			
In or near (City or Town) County Tax Map # Tax Lot # ²			
Portland Multinemah INIE17 INIE18D Wetland/Waterway (pick one) River Mile (if known) Latitude (in DD.DDDD format) Longitude (in DD.DDDD format)			
Swan Island Lagoon 8,2 45,5662 -122.7218 West End Swan Is			

² Attach a copy of all tax maps with the project area highlighted.

¹ If applicant is not the property owner, permission to conduct the work must be attached.

Italicized areas are not required by the Corps for a complete application, but may be necessary prior to final permit decision by the Corps.

(3) PROPOSED PROJECT INFORMATION					
Type: Fill Excavation (removal) In-Water Structure Maintain/Repair an Existing Structure					
Brief Description: R	Brief Description: Remove 81,000 cu. vds silt from dry dock 1+3 basins				
Fill					
Riprap	Gravel	Organics Sand	Silt 🗌	Clay Other:	
Wetlands	Permanent (cy)	Temporary (cy)	-	Total cubic yards for project	
	Impact Area in Acres	Dimensions (feet)	H'	(including outside OHW/wetlands)	
Waters below OHW	Permanent (cy)	Temporary (cy)		Total cubic yards for	
	Impact Area in Acres	Dimensions (feet)	117	project (including outside OHW/wetlands)	
Domeral		L' W'	H'		
Removal Wetlands	Permanent (cy)	Temporary (cy)	····	Total cubic yards for	T
wettands	remaiem (cy)	Temporary (cy)		project	
	Impact Area in Acres	Dimensions (feet)		(including outside OHW/wetlands)	
Waters below OHW	Permanent (cy)	L' W' Temporary (cy)	H'	Total cubic yards for	
81 000 project		project	81,000		
Impact Area in Acres Dimensions (feet) See Attached				(including outside OHW/wetlands)	01,000
Total acres of construct	6.42 L' W' H' H' Total acres of construction related ground disturbance (If 1 acre or more a 1200-C permit may be required from DEQ)				
Is the disposal area upl	and? Yes 🔀 No	Impervious sur	face created?	0<1 acre	? 🗆
Yes No If yes, please explain in the project description (in block 4)					
Are you aware of any s	tate or federally listed specie	es on the project site?	1	X	, i
	Cultural/Historic Resources o			↓	
	n a national <u>Wild & Scenic F</u> n a State Scenic <u>State Scenic</u>			$\hat{\chi}$	-
	· · · · · · · · · · · · · · · · · · ·				
		D PROJECT PURPO	SE AND [DESCRIPTION	
Purpose and Need:					
Provide a description of the public, social, economic, or environmental benefits of the project along with any supporting formal actions of a public body (e.g. city or county government), as appropriate.*					
Project will remove silt from dry dock basins carried in and deposited by Willametteriver. Dredging will return dry dock basins to their original depths, allowing full operation of dry docks. Dry docks are critical to Vigor's ship repair and maintenance business.					

v. 07-07-09

Italicized areas are not required by the Corps for a complete application, but may be necessary prior to final permit decision by the Corps.

Project Description: See Sampling and Analysis Plan (May 2019)
Please describe in detail the proposed removal and fill activities, including the following information: Volumes and acreages of all fill and removal activities in waterway or wetland separately Permanent and temporary impacts Types of materials (e.g., gravel, silt, clay, etc.) How the project will be accomplished (i.e., describe construction methods, equipment, site access) Describe any changes that the project may make to the hydraulic and hydrologic characteristics (e.g., general direction of stream and surface water flow, estimated winter and summer flow volumes.) of the waters of the state, and an explanation of measures taken to avoid or minimize any adverse effects of those changes. Is any of the work already complete? Yes No If yes, please describe the completed work. In addition, for fish habitat or wetland restoration or enhancement activities, complete the information requested in supplemental Fish Habitat or Wetland Restoration and Enhancement form.
Project Drawings
State the number of project drawing sheets included with this application: 2 (See SAP) A complete application must include a location map, site plan, cross-section drawings and recent aerial photo as follows and as applicable to the project: Location map (must be legible with street names) Site plan including; Entire project site and activity areas Existing and proposed contours Location of ordinary high water, wetland boundaries or other jurisdictional boundaries Identification of temporary and permanent impact areas within waterways or wetlands Map scale or dimensions and north arrow Location of staging areas Location of construction access Location of cross section(s), as applicable Location of mitigation area, if applicable Cross section drawing(s) including; Existing and proposed elevations Identification of temporary and permanent impact areas within waterways or wetlands Ordinary high water and/or wetland boundary or other jurisdictional boundaries Map scale or dimensions Recent Aerial photo (1:200, or if not available for your site, the highest resolution available)
Will any construction debris, runoff, etc., enter a wetland or waterway? Yes \(\square\) No \(\square\) If yes, describe the type of discharge and show the discharge location on the site plan.
Estimated project start date: I_{uv} , I_{uv} Estimated project completion date: S_{ep} , I_{uv}

(5) PROJECT IMPACTS AND ALTERNATIVES

Alternatives Analysis:

Describe alternative sites and project designs that were considered to avoid or minimize impacts to the waterway or wetland. (Include alternative design(s) with less impact and reasons why the alternative(s) were not chosen. Reference OAR 141-085-0565 (1) through (6) for more information*).

No alternatives possible. Maintenance dredging of existing basins will have the least impact on the lagoon.

Measures to Minimize Impacts

Describe what measures you will use (before and after construction) to minimize impacts to the waterway or wetland. These may include but are not limited to the following:

- For projects with ground disturbance include an erosion control plan or description of other best management practices (BMP's) as appropriate. (For more information on erosion control practices see DEO's Oregon Sediment and Erosion Control Manual)
- For work in waterways where fish or flowing water are likely to be present, discuss how the work area will be isolated from the flowing water.
- If native migratory fish are present (or were historically present) and you are installing, replacing or abandoning a culvert or other potential obstruction to fish passage, complete and attach a statement of how the <u>Fish Passage Requirements</u>, set by the Oregon Department of Fish and Wildlife will be met.

Dry dock basins are within the Swan Island lagoon-no flowing water. Dredging will be accomplished with a cable arm bucket and material placed on a contained flat deck barge. Dredged material will be disposed of in an upland landfill.

v. 07-07-09

Description of resources in project area			
Ocean			
(Use separate sheets and photos, if necessary).			
For wetlands, include, as applicable:			
 Cowardin and Hydrogeomorphic(HGM) wetland class(s)* Dominant plant species by layer (herb, shrub, tree)* Whether the wetland is freshwater or tidal Assessment of the functional attributes of the wetland to be impacted* Identify any vernal pools, bogs, fens, mature forested wetland, seasonal mudflats, or native wet prairies in or near the project area.) 			
For waterways, include a description of, as applicable: Channel and bank conditions* Type and condition of riparian vegetation* Channel morphology (i.e., structure and shape)* Stream substrate* Fish and wildlife (type, abundance, period of use, significance of site) General hydrological conditions (e.g. stream flow, seasonal fluctuations)*			
Describe the existing navigation, fishing and recreational use of the waterway or wetland.*			
Dredging will be on submerged land owned by Vigor Industrial. Ship repair/maintenance isonly use.			

Site Restoration/Rehabilitation					
For temporary disturbance of soils and/or vegetation in water	erways, wetlands or ripo	rian areas, please	discuss how you wi	ll restore the site after	
construction including any monitoring, if necessary* NA					
Mitigation					
Describe the reasonably expected adverse effects of the developme	ent of this project and h	ow the effects will	be mitigated.*		
For permanent impact to wetlands, complete and attach a Compensatory Wetland Mitigation (CWM) Plan. (See OAR 141-085-0705 for plan requirements)* For permanent impact to waters other than wetlands, complete and attach a Compensatory Mitigation (CM) plan (See OAR 141-085-0765 for plan requirements)* For permanent impact to estuarine wetlands, you must submit a CWM plan.* No adverse effects anticipated Mitigation Location Information (Fill out only when mitigation is proposed or required) Proposed Onsite Mitigation Type of mitigation:					
mitigation		Mitigation on for impacts to o	ther waters		
Payment to Provide		-	avigation, fishing, o	r recreation	
Street, Road or Other Descriptive Location Leg	al Description (attach <u>t</u>	ax lot map*)			
Qua	arter/Quarter	Section	Township	Range	
In or near (City or Town) County	Tax Map #		Tax Lot #3		
Wetland/Waterway (pick one) River Mile (if known)	Latitude (in Di	D.DDDD format)	Longitude (in	DD.DDDD format)	
Name of waterway/watershed/ <u>HUC</u>	Name of mitig	Name of mitigation bank (if applicable)			

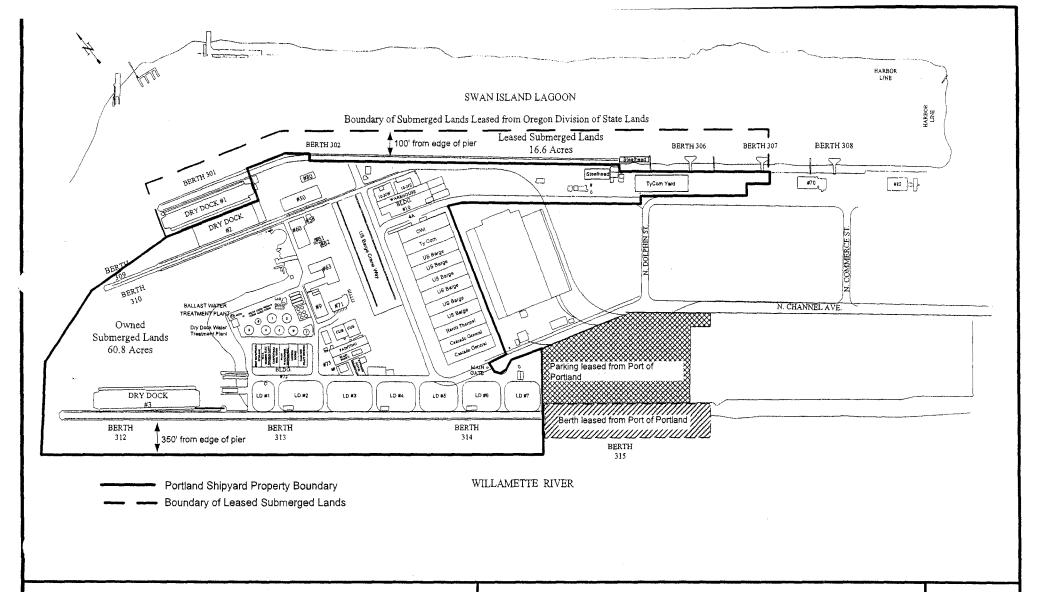
Attach a copy of all tax maps with the project area highlighted.
 Italicized areas are not required by the Corps for a complete application, but may be necessary prior to final permit decision by the Corps.

(6) ADDITIONAL INFORMATION				
Adjoining Property Owners and Their Address and Phone Numbers (if more than 5, attach printed labels*)				
Has the proposed activity or any related activity received the attention of the Corps of Engineers or the Department of State Lands in the past, e.g., wetland delineation, violation, permit, lease request, etc.?				
Yes No \(\text{No } \text{\text{If yes, what identification number(s) were assigned by the respective agencies:}}\) Corps # \(94 - \rangle \rangle \rangle \text{State of Oregon #} \) State of Oregon #				
If yes, what identification number(s) were assigned by the respective agencies: Corps # 94-10/19 State of Oregon # State of Oregon #				
Corps # 94 - 00619 State of Oregon #				
Has a wetland delineation been completed for this site? Yes No				
If yes by whom?*				
Has the wetland delineation been approved by DSL or the COE? Yes No I If yes, attach a concurrence letter. *				

(7) CITY/COUNTY PLANNING DEPARTMENT AFFIDAVIT (TO BE COMPLETED BY LOCAL PLANNING OFFICIAL) *				
This project is consistent w	d by the comprehensive plan and latith the comprehensive plan and lanent with the comprehensive plan an	nd use regulations. d use regulations. d land use regulations when the follo requires a	wing local approval(s) a	re obtained.
Local planning official name Sig (print)	mature	Title	City / County	Date
	3. Delly	City Planner	Portland	411/09
Comments:				
In-water work only, and the removal of gri	avel from river is a	exempt from Granway	Reven per 33	1,440,320.H.
(8) COASTAL ZONE CERTIFICATION *				
If the proposed activity described in yapplication can be processed. A public Conservation and Development for its the department at 635 Capitol Street No. I certify that, to the best of my knowled.	c notice will be issued with the cer concurrence or objection. For add IE, Suite 150, Salem, Oregon 9730 CERTIFICA' edge and belief, the proposed activi	tification statement, which will be fo ditional information on the Oregon Co I or call 503-373-0050. IION STATEMENT ty described in this application comp	rwarded to the Oregon I oastal Zone Managemen	Department of Land at Program, contact
Zone Management Program and will be completed in a manner consistent with the program. Print /Type Name Title				
Time / Type rame		1110		
Applicant Signature		Date		

Application is hereby made for the activities described herein. I certify that I am familiar with the information contained in the application, and, to the best of my knowledge and belief, this information is true, complete, and accurate. I further certify that I possess the authority to undertake the proposed activities. By signing this application I consent to allow Corps or Dept. of State Lands staff to enter into the above-described property to inspect the project location and to determine compliance with an authorization, if granted. I herby authorize the person identified in the authorized agent block below to act in my behalf as my agent in the processing of this application and to furnish, upon request, supplemental information in support of this permit application.

permits requested before comme		te or federal agencies does not release me from at payment of the required state processing <u>fe</u> or or completeness.	
Amount enclosed \$			
Print /Type Name	Title	Print /Type Name	Title
Gene Caudill	Project Mar		
Applicant Signature	Date	Authorized Agent Signature	Date
b. Caudill	8-10-09		
submersible lands, please provide submerged/submersible lands on	de signatures below. A signature b nly grants the applicant consent to	osed on land not owned by the applicant, incl y the Department of State Lands for activities apply for authorization to conduct removal/fil lands grants no other authority, express or in	proposed on state-owned l activities on such lands. This
Print /Type Name	Title	Print /Type Name	Title
Property Owner Signature	Date	Mitigation Property Owner Signature	Date





PORTLAND SHIPYARD BOUNDARY MAP

APPROXIMATE SCALE: 1" = 400'

